

MEETING TABLE

Name of the Student:

ID #

Meeting Sl No.	Date	Time	Signature of the Supervisor	Signature of the Student	Remarks
1					
2					
3					
4					
5					
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7					
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10					
11					
12					
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14					
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16					
17					
18					

Signature of the Academic Supervisor



American International University-Bangladesh (AIUB)

INTERNSHIP REPORT ON
“Title”

An Internship Report Presented to the Faculty of Business Administration
in Partial Fulfillment of the Requirements for the Degree of
Bachelor of Business Administration

Supervised By:
“Name of the Supervisor”
**“Academic Rank e.g. Lecturer/Assistant Professor/
Associate Professor/ Professor”**

Submitted By:
“Name of the Student”
“ID #”
“Major”

Date of Submission: Date/Month/Year

INTERNSHIP REPORT ON
“Title”